Case 15-22736 Doc 1 Filed 07/01/15 Entered 07/01/15 12:01:40 Desc Main

B1 (Official Form 1) (04/13)	- Document -	Page 1 of 2	8	
United States Bankruf	PTCY COURT	9	VOLUNTARY PE	TITION
Name of Debtor (if individual, enter Last, First, Middle): Roman, Debora		Name of Joint Debtor (Spouse) (Last, First, Middle):		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):		
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITI) (if more than one, state all): xxx-xx-7354	N)/Complete EIN	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete E (if more than one, state all):		
Street Address of Debtor (No. and Street, City, and State): 8815 Golf Road #9H Niles, IL	tress of Debtor (No. and Street, City, and State): Street Address of Joint Debtor (No. and Street, City, and State):			
	ZIP CODE60714			ZIP CODE
County of Residence or of the Principal Place of Business: Cook County		County of Residence	e or of the Principal Place of Business	S:
Mailing Address of Debtor (if different from street address):		Mailing Address of	Joint Debtor (if different from street a	address):
Landing Chicago the Associated Production Policy Co. 100	ZIP CODE			ZIP CODE
Location of Principal Assets of Business Debtor (if different fi	rom street address above):			ZIP CODE
Type of Debtor (Form of Organization) (Check one box.)	Nature of (Check one box.)	Business	Chapter of Bankruptcy Co the Petition is Filed (Cl	
✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.)	11 U.S.C. § 101(Railroad Stockbroker Commodity Brok	d Estate as defined in 51B)	☐ Chapter 9 Re ☐ Chapter 11 Ma ☐ Chapter 12 ☐ Ch ☐ Chapter 13 Re	apter 15 Petition for cognition of a Foreign in Proceeding apter 15 Petition for cognition of a Foreign inmain Proceeding
Chapter 15 Debtors	Tax-Exem		Nature of De	
Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Debtor is a tax-ex under title 26 of the	(Check one box.) Debts are primarily consumer Debts are debts, defined in 11 U.S.C. primarily for a personal, family, or		Debts are
Filing Fee (Check one box.)		Clark	household purpose." Chapter 11 Debtors	
✓ Full Filing Fee attached.		Check one box: Debtor is a sma	all business debtor as defined in 11 U.	S.C. § 101(51D).
Filing Fee to be paid in installments (applicable to individual signed application for the court's consideration certifying unable to pay fee except in installments. Rule 1006(b).	g that the debtor is See Official Form 3A.	Check if: Debtor's aggre	small business debtor as defined in 1 i gate noncontingent liquidated debts (e iates) are less than \$2,490,925 (amou	excluding debts owed to
Filing Fee waiver requested (applicable to chapter 7 indivattach signed application for the court's consideration. So		Check all applicable boxes: A plan is being filed with this petition. Acceptances of the plan were solicited prepetition from one or more classes		
Statistical/Administrative Information		of cicultors, in	accordance with 11 U.S.C. § 1126(b).	THIS SPACE IS FOR
Debtor estimates that funds will be available for dist Debtor estimates that, after any exempt property is e distribution to unsecured creditors.			will be no funds available for	COURT USE ONLY
Estimated Number of Creditors				1
1-49 50-99 100-199 200-999 1,000- 5,000		,001- 25,001- ,000 50,000	50,001- Over 100,000 100,000	
Estimated Assets \$0 to \$50,001 to \$100,001 to \$500,001 \$1,000, \$50,000 \$100,000 \$500,000 to \$1 to \$10 million million	to \$50 to	0,000,001 \$100,000 \$100 to \$500 Ilion million	001 \$500,000,001 More than to \$1 billion	
Estimated Liabilities	to \$50 to	0,000,001 \$100,000, \$100 to \$500 Ilion million	001 \$500,000,001 More than to \$1 billion	

B1 (Official Forr	Case 15-22736 Doc 1 Filed 07/01/15		40 Desc Main			
Voluntary Pet	ition t be completed and filed in every case.)	Page 2 of 28 Name of Debtor(s):				
(1 ms page mus.	All Prior Bankruptcy Cases Filed Within Last 8	B Years (If more than two, attach additional shee	1)			
Location		Case Number:	Date Filed:			
Where Filed: Location		Case Number:	Date Filed:			
Where Filed:	Pending Bankruptcy Case Filed by any Spouse, Partner, or A	Milate of this Debtor Of more than one attach.	odditional chapt)			
Name of Debtor	I.	Case Number:	Date Filed:			
District:		Relationship:	Judge:			
10Q) with the S	Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) I, the attorney for the petitioner named in the foregoing petition, declare that I h informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or of title 11, United States Code, and have explained the relief available under e such chapter. I further certify that I have delivered to the debtor the notice required.					
☐ Exhibit A	A is attached and made a part of this petition.	by 11 U.S.C. § 342(b).	00404045			
		X /s/ Michelle Andres Signature of Attorney for Debtor(s) (06/10/2015 Date)			
		- organisate of rantomey for Debion(s) (Care)			
	own or have possession of any property that poses or is alleged to pose Exhibit C is attached and made a part of this petition.	a threat of imminent and identifiable harm to pu	blic health or safety?			
Exhibit D,	d by every individual debtor. If a joint petition is filed, each spouse must completed and signed by the debtor, is attached and made a part of this petition: , also completed and signed by the joint debtor, is attached and made a part of this petition.	petition.				
U	Information Regarding (Check any app Debtor has been domiciled or has had a residence, principal place of preceding the date of this petition or for a longer part of such 180 day	licable box.) of business, or principal assets in this District f	or 180 days immediately			
	There is a bankruptcy case concerning debtor's affiliate, general partr	ner, or partnership pending in this District.				
	Debtor is a debtor in a foreign proceeding and has its principal place no principal place of business or assets in the United States but is a District, or the interests of the parties will be served in regard to the re	of business or principal assets in the United Sta defendant in an action or proceeding [in a feder	tes in this District, or has eral or state court] in this			
	Certification by a Debtor Who Resides (Check all applic					
	Landlord has a judgment against the debtor for possession of debto	or's residence. (If box checked, complete the following	owing.)			
		(Name of landlord that obtained judgment)				
		(Address of landlord)				
	Debtor claims that under applicable nonbankruptcy law, there are centire monetary default that gave rise to the judgment for possessio	ircumstances under which the debtor would be p	ermitted to cure the , and			
	Debtor has included with this petition the deposit with the court of of the petition.	any rent that would become due during the 30-da	ny period after the filing			
	Debtor certifies that he/she has served the Landlord with this certifi	ication. (11 U.S.C. § 362(1)).				

B1 (Official Porm 1) (04/13) Page 3 Voluntary Petition Name of Debtor(s): (This page must be completed and filed in every case.) Signatures Signature(s) of Debior(s) (Individual/Joint) Signature of a Foreign Representative I declars under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding. I declare under penalty of parjury that the information provided in this petition is true алд солесь [If pelitioner is an individual whose debts are primarily consumer debts and has and that I am authorized to file this petition. chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 (Check only one box.) or 13 of title 11. United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. I request relief in accordance with chapter 15 of title 11, United States Code. [if no attorney represents me and no bankruptcy polition preparer signs the polition] I Certified copies of the documents required by 11 U.S.C. § 1515 are attached. have obtained and read the notice required by 11 U.S.C. § 342(b), Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the I request relief in accordance with the chapter of little 11, United States Code, chapter of title 11 specified in this petition. A certified copy of the specified in this petition. order granting recognition of the foreign main proceeding is attached. Signature of Debtor (Signature of Foreign Representative) Х Signature of Joint Debtor 847 699 (Printed Name of Poreign Representative) Telephone Number (if not represented by attorney) Date Date /s/ Michelle Andres Mulul Signature of Non-Attorney Bankruptey Petition Preparer I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, (2) I prepared this document for compensation and have х Signature of Attorney for Debtor(s) Michalia Andres provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and (3) if rules of guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum Printed Name of Attorney for Debtor(s) Firm Name fee for services chargeable by bankruptcy petition preparers, I have given the debtor 218 N. Jefferson St. #109 notice of the maximum amount before preparing any document for filing for a debtor Chicago, IL 60661 or accepting any fee from the debtor, as required in that section. Official Porm 19 is attached. Address 312-776-0980 Telephone Number 06/10/2015 Printed Name and title, if any, of Bankrupley Petition Preparer Social-Security number (If the bankruptcy petition preparer is not an individual, *In a case in which § 707(bX4XD) applies, this signature also constitutes a slate the Social-Security number of the officer, principal, responsible person or certification that the attorney has no knowledge after an inquiry that the information pariner of the bankruptcy polition preparer,) (Required by 11 U.S.C. § [10.) in the schedules is incorrect. Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true Address and correct, and that I have been authorized to file this petition on behalf of the The debtor requests the relief in accordance with the chapter of title 11, United States Signsture Code, specified in this petition. Date Signature of Authorized Individual Signature of bankruptcy petition preparer or officer, principal, responsible person, or Printed Name of Authorized Individual partner whose Social-Security number is provided above. Title of Authorized Ledividual Names and Social-Security aurobers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an Date individuel. If soore than one person prepared this document, ellach additional sheets conforming to the appropriate official form for each person. A bankriptcy patition preparer's failure to comply with the provisions of this 11 and the Federal Rules of Bankripley Procedure may result in fines or Imprisonment or

both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Filed 07/01/15

Entered 07/01/15 12:01:40 Desc Main

B 6 Summary (Official Form 6 - Summary) (12/14)

Page 4 of 28 Document

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re_Debora Roman	Case No.
Debtor	
	Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$ 70,000.00		
B - Personal Property	YES	3	\$ 4,018.00		
C - Property Claimed as Exempt	YES	1			
D - Creditors Holding Secured Claims	YES	1		\$ 59,000.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	3		\$ 38,155.00	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	2			\$ 2,056.07
J - Current Expenditures of Individual Debtors(s)	YES	3			\$ 1,882.85
т	OTAL	18	\$ 74,018.00	\$ 97,155.00	

B 6 Summary (Official Form 6 - Summary) (12/14)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re_Debora Roman	Case No.
Debtor	
	Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

□ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount	
Domestic Support Obligations (from Schedule E)	\$	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	s	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$	0.00
Student Loan Obligations (from Schedule F)	\$	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$	0.00
TOTAL	\$	0.00

State the following:

Average Income (from Schedule I, Line 12)	\$ 2,056.07
Average Expenses (from Schedule J, Line 22)	\$ 1,882.85
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	\$ 2,808.67

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 38,155.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 38,155.00

Case 15-22736 Doc 1 Filed 07/01/15 Entered 07/01/15 12:01:40 Desc Main Document Page 6 of 28

B6A (Official Form 6A) (12/07)

In re Debora Roman	Case No.
Debtor	(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Condo at 8815 Golf Road #9H Niles, IL 60714	Current Residence		70,000.00	\$59,000
		10年 24日 24日 24日		

(Report also on Summary of Schedules.)

Dahaya Dawa	Document	Page 7 of 28		
In re Debora Roman	 ······	Case No		
Debtor			(If known)	

SCHEDULE B - PERSONAL PROPERTY

(If known)

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	Х			
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		US Bank- Checking Account		360.00
Security deposits with public utilities, telephone companies, landlords, and others.	x			
Household goods and furnishings, including audio, video, and computer equipment.		Used Furniture		400.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.	x			
6. Wearing apparel.	1.47 1.474	Normal Wearing Appaeral		150.00
7. Furs and jewelry.	x			
8. Firearms and sports, photographic, and other hobby equipment.	X			
 Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. 	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X		N.A.	

B 6B (Official CAS 63 1 57 22 7 3 6).	Doc 1	Filed 07/01/15	Entered 07/01/15 12:01:40	Desc Main
(Page 8 of 28	

In re Debora Roman	Case No.
Debtor	(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
	12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		401 (K)	***************************************	22 <i>50,0</i> 0
	13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
	14. Interests in partnerships or joint ventures. Itemize.	X			
	15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
	16. Accounts receivable.	х			
ı	17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
	18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	х			
	19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A – Real Property.	X			
Ţ	20. Contingent and noncontingent nterests in estate of a decedent, death penefit plan, life insurance policy, or trust.	X	and the second of the property of the second	* 4 1	
1	21. Other contingent and unliquidated claims of every nature, including tax efunds, counterclaims of the debtor, and ights to setoff claims. Give estimated value of each.	X			

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D (D			

In re	Debora Roman	•	Case No.	
	Debtor		(If known)	_

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
22. Patents, copyrights, and other intellectual property. Give particulars.	х			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2003 Chrysler PT Cruiser with 130,000 miles		858.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories,	X			
28. Office equipment, furnishings, and supplies.	Х			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	Х			
31. Animals.	×	或是基準式學園及基礎與其中的實際的		
32. Crops - growing or harvested. Give particulars.	х			ı
33. Farming equipment and implements.	X	表示 医电子性 医电子性 医电子性 医电子性 医电子性 医电子性 医电子性 医电子性		
34. Farm supplies, chemicals, and feed.	х			
35. Other personal property of any kind not already listed. Itemize.	X			
	· ·	0 continuation sheets attached Total>	.	s 4018,00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

Debtor			·	(If known)
In re			Case No	
Case 15-22/36 B6C (Official Form 6C) (04/13)	Doc 1	Document	Entered 07/01/15 12:0 Page 10 of 28	01:40 Desc Main

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims	the exemption	ns to which	ı debtor is	entitled	under:
Check one bo	ox)				

☐ 11 U.S.C. § 522(b)(2)

11 U.S.C. § 522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$155,675.*

			CURRENT
DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Checking, savings, other accounts: Account with Citibank	735 ILCS 5/12-1001(b)	\$360	\$360
Household goods and furnishings: misc used furniture	735 ILCS 5/12-1001(b)	\$400	\$400
Wearing appearal: Necessary used clothing	735 ILCS 5/12-1001 (a)	\$150	\$150
Automobiles: 1 2003 Chrysler car	735 ILCS 5/12-1001(c)	\$858	\$858
Interests in IRA, etc: 401(k)	735 ILCS 5/12-704 and 735 ILCS 5/12-1001(b)	\$2250 and Roth \$500	\$2250 and Roth \$500
Single Family Condo in Niles	735 ILCS 5/12-901	\$11,000	\$70,000

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 15-22736 Doc 1 Filed 0

Filed 07/01/15 Document Entered 07/01/15 12:01:40 Page 11 of 28

Desc Main

B 6D (Official Form 6D) (12/07)

In re	Debora	Roman
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Debtor

Case No.

(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND

DATE CLAIM WAS C. 9 AMOUNT O

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NOXXX- 9198			9/1996					
Loancare Servicing Ctr 3637 Sentara Way Virginia Beach, VA 23452							34,000.00	0.00
	1							
			VALUE \$	1				
ACCOUNT NOxxx-5570 Citimortgage Inc PO Box 6243			7/2006					
Sioux Falls, SD 57117	*						25,000.00	0.00
ACCOUNT NO.			VALUE \$		\longrightarrow			
ACCOUNT NO.	***		VALUE \$	Test and the second sec				
continuation sheets attached		1 .	Subtotal ► (Total of this page)	L	i.		\$ 59,000.00	\$
			Total ► (Use only on last page)				\$ 59,000.00	\$
							(Report also on Summary of	(If applicable report

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.) Case 15-22736 Doc 1 Filed 07/01/15 Document

Page 12 of 28

Entered 07/01/15 12:01:40 Desc Main

B6E (Official Form 6E) (04/13)

Contributions to employee benefit plans

In re Debora Roman	Case No.
Debtor	(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name; See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in Joint, or Community." the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all rs

amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debto with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)
Domestic Support Obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re Debora Roman ,	Case No(if known)
Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fishermen.	herman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals	
Claims of individuals up to \$2,775* for deposits for the purchase, lease, that were not delivered or provided. 11 U.S.C. § 507(a)(7).	or rental of property or services for personal, family, or household use,
Taxes and Certain Other Debts Owed to Governmental Units	
Taxes, customs duties, and penalties owing to federal, state, and local go	vernmental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to Maintain the Capital of an Insured Depository In	stitution
Claims based on commitments to the FDIC, RTC, Director of the Office of Governors of the Federal Reserve System, or their predecessors or successor § 507 (a)(9).	of Thrift Supervision, Comptroller of the Currency, or Board of ors, to maintain the capital of an insured depository institution. 11 U.S.C.
Claims for Death or Personal Injury While Debtor Was Intoxicated	I
Claims for death or personal injury resulting from the operation of a moto drug, or another substance. 11 U.S.C. § 507(a)(10).	r vehicle or vessel while the debtor was intoxicated from using alcohol, a
* Amounts are subject to adjustment on 4/01/16, and every three years there adjustment.	zafter with respect to cases commenced on or after the date of

0 continuation sheets attached

Case 15-22736

B6E (Official Form 6E) (04/13) - Cont.

Doc 1 Filed 07/01/15 Entered 07/01/15 12:01:40 Desc Main Document Page 13 of 28

R 6F (Official For Case, 15-22736	Doc 1	Filed 07/01/15	Entered 07/01/15 12:01:40	Desc Main	
D of (Official Form of) (12/07)		Document	Page 14 of 28		
In re_Debora Roman		,	Case No.		
Debtor				(if known)	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated," If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data..

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY CREDITOR'S NAME, DATE CLAIM WAS AMOUNT OF UNLIQUIDATED CONTINGENT CODEBTOR MAILING ADDRESS INCURRED AND CLAIM DISPUTED INCLUDING ZIP CODE, CONSIDERATION FOR AND ACCOUNT NUMBER CLAIM. (See instructions above.) IF CLAIM IS SUBJECT TO SETOFF, SO STATE. ACCOUNT NOXXX-7517 12/1982 Chase Card 25,995.00 PO Box 15298 Wilmington, DE 19850 ACCOUNT NOXXX-9568 6/2008 US Bank 9,114.00 Cb Disputes Saint Louis, MO 63166 1/2003 ACCOUNT NOXXX-6537 Capital One Bank 528.00 15000 Capital One Dr Richmond, VA 23238 1/2015 ACCOUNT NO.11993 Advanced Radiology Con 350.00 PO Box 74850 Chicago, IL 60694 Subtotal> continuation sheets attached Total≯ (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

B 6F (Official For CAS P2.45-22736	Doc 1	Filed 07/01/15	Entered 07/01/15 12:01:40	Desc Mair
(* ****** = *****			Page 15 of 28	

In re Debora Roman	Case No.
Debtor	(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

	T	T . s		7	T "	 	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NOXXX-0908	-		10/2014				
Advocate Lutheran General PO Box 4249 Carol Stream, IL 60197							1,200.00
ACCOUNT NOXXX-9167			10/2014		-		
Westfield Insurance One Park Circle PO Box 5001 Westfield Center, OH 44251						-	96.00
ACCOUNT NOXXX-4482		***************************************	8/2104				
Golf Western Surgical Specialists 8901 Golf Terrace #305 Des Plaines, IL 60016				:			550.00
ACCOUNT NOXXX-52872			8/2014				
LM prasad MD SC 1550 N. Northwest Hwy, Ste 107 Park Ridge, IL 60068							1,200.00
ACCOUNT NO.							
Sheet no. 2 of 3 continuation sh							
Sheet no of continuation she to Schedule of Creditors Holding Unsecured Nonpriority Claims	eets attacl	hed			Subte	tal≻	°3046.00
		(Report al	(Use only on last page of the co so on Summary of Schedules and, if appli Summary of Certain Liabilit	cable on	Schedul	stical	\$

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	 AMOUNT OF CLAIM
						5		
	ACCOUNT NO.XXX-9013 AT & T CO BK 1801 Valley View Ln Farmers Branch, TX 75234			6/2015				72.00
	ACCOUNT NO.XXX-8002 ComEd BK Dept B Lincoln Center Dakbrook Terrace, IL 50181			6/2015				50.00
	ACCOUNT NO.							
,	ACCOUNT NO.							
1	CCOUNT NO.							
to	heet no. 3 of 3 continuation she Schedule of Creditors Holding Unsecured onpriority Claims		hed			Subto	tal⊁	\$ 122.00
			(Report al	(Use only on last page of the co so on Summary of Schedules and, if applic Summary of Certain Liabiliti	able on	Schedul	tical	\$ 38,155.00

Case 15-22736	Doc 1	Filed 07/01/15	Entered 07/01/15 12:01:40	Desc Main
		Document	Page 17 of 28	

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE ANI NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT

Case 15-22736 [B 6H (Official Form 6H) (12/07)	Doc 1 Filed 07/01/15 Document	Entered 07/01/15 12:01:40 Page 18 of 28	Desc Main
In re Debora Roman	, ,	Case No.	
Debtor			(if known)
	SCHEDULE H	I - CODEBTORS	
debtor in the schedules of creditors. Inc commonwealth, or territory (including A Wisconsin) within the eight-year period former spouse who resides or resided wi nondebtor spouse during the eight years	clude all guarantors and co-signer Alaska, Arizona, California, Idaho immediately preceding the committh the debtor in the community p immediately preceding the common of the child's parent or guardian, ted. R. Bankr. P. 1007(m).	ther than a spouse in a joint case, that is also is. If the debtor resides or resided in a commo, Louisiana, Nevada, New Mexico, Puerto Benencement of the case, identify the name of property state, commonwealth, or territory. In nencement of this case. If a minor child is a such as "A.B., a minor child, by John Doe, a	nunity property state, Rico, Texas, Washington, or the debtor's spouse and of any nelude all names used by the codebtor or a creditor, state the
NAME AND ADDRESS	OF CODERTOR	NAME AND ADDRESS OF	CREDITOR

NAME AND ADDRESS OF CREDITOR

Case 15-22736 Doc 1 Filed 07/01/15 Entered 07/01/15 12:01:40 Desc Main Document Page 19 of 28

Fill in this information to identify	y your case:			
Debora Roman				
First Name Debtor 2	Middle Name	Last Name		
(Spouse, if filing) First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:	Northern District of Illino	Dis ▼ I		
Case number (If known)		••	Check if	
				nended filing plement showing post-petition
Official Farms D.Cl				er 13 income as of the following date:
Official Form B 6I		tie klasse, et annotes van en	MM/D	D/YYYY
Schedule I: You	ur Income			12/13
supplying correct information. If y	ou are married and not fi use is not filing with you, e top of any additional pa	iling jointly, and your spouse , do not include Information :	is living with a about your spo	or 2), both are equally responsible for you, Include information about your spous ouse. If more space is needed, attach a known). Answer every question.
Fill in your employment information.		Debtor 1		Debtor 2 or non-filling spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employed	ошительный аймериков (должный должный	Employed Not employed
Include part-time, seasonal, or		Canada , ,		<u></u>
self-employed work. Occupation may Include student or homemaker, if it applies.	Occupation	Default Resolution Sp	oecialist	-
	Employer's name	Financial Manageme	nt Systems	
	Employer's address	1701 Golf Road Number Street Suite 2-150		Number Street
		Delling Manday (I. 4		
		Rolling Meadows, IL to	IP Code	City State ZIP Code
	How long employed the	re? 1year		
Part 2: Give Details About	Monthly Income			
Section 1997	-	n. If you have nothing to report	for any line, wr	ite \$0 in the space. Include your non-filing
spouse unless you are separated. If you or your non-filing spouse ha below. If you need more space, at	ve more than one employe	er, combine the information for		•
, ,	•		or Debtor 1	For Debtor 2 or non-filing spouse
List monthly gross wages, sala deductions). If not paid monthly, or	ry, and commissions (be calculate what the monthly	efore all payroll wage would be. 2. \$_	2,762.62	\$
3. Estimate and list monthly overt	ime pay.	3. +\$_	46.05	+ \$
4. Calculate gross Income. Add lin	e 2 + line 3.	4. \$_	2,808.67	\$
		<u> </u>		

Case 15-22736 Doc 1 Filed 07/01/15 Entered 07/01/15 12:01:40 Desc Main

Case number (if known)_

Document Page 20 of 28

Debora Roman

Debtor 1

First Name Middle Name Last Name		Case number (ir.		
		For Debtor 1	For Debtor 2 or non-filling spouse	
Copy line 4 here	→ 4	\$_2,808.67	\$	
5. List all payroll deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	\$ 376.60	\$	
5b. Mandatory contributions for retirement plans	5b.	\$	\$	
5c. Voluntary contributions for retirement plans	5c.	\$360.00	\$	
5d. Required repayments of retirement fund loans	5d.	\$	\$	
5e. Insurance	5e.	\$ <u> </u>	\$	
5f. Domestic support obligations	5f.			······································
5g. Union dues	5g.	\$	\$	
5h. Other deductions. Specify:	5h.	+\$	+ \$	
		s 752.60	υ φ	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	V	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 2,056.07	\$	
8. List all other income regularly received:				
 Net Income from rental property and from operating a business, profession, or farm 				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	\$	
8b. Interest and dividends	8b.	\$	\$	
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive	ent			
Include alimony, spousal support, child support, maintenance, divorce settlement, and properly settlement.	8c.	\$	\$	
8d. Unemployment compensation	8d.	\$	\$	
8e. Social Security	8e.	\$	\$	1970
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistar that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$	\$	
8g. Pension or retirement income	8g.	\$	\$	
8h. Other monthly income. Specify:	8h.	V	Ψ	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$0.00	+\$ \$	
D. Calculate monthly income, Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ 2,056.07	+ \$=	\$ <u>2,056.07</u>
 State all other regular contributions to the expenses that you list in Scheolinclude contributions from an unmarried partner, members of your household, yother friends or relatives. 			nmates, and	
Do not include any amounts already included in lines 2-10 or amounts that are		ailable to pay expen		0.00
Specify:			11. +	\$0.00
Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of Ce	result ertain l	is the combined mor Liabilities and Relate	nthly income. ed Data, if it applies 12.	\$2,056.07
3. Do you expect an increase or decrease within the year after you file this f	orm?			Combined monthly income
✓ No. Yes, Explain:				

Case 15-22736 Doc 1 Filed 07/01/15 Entered 07/01/15 12:01:40 Desc Main Document Page 21 of 28

Fill in this information to identify your case:		
Debtor 1 Debora M Roman First Name Middle Name Last Name	Check if this	a la
Deblor 2	<u> </u>	
(Spouse, if filing) First Name Middle Name Last Name		nded filing ement showing post-petition chapter 13
United States Bankruptcy Court for the: Northern District of Illinois		s as of the following date:
Case number (if known)	MM / DD	
Official Form B 6J		ate filing for Debtor 2 because Debtor 2 s a separate household
Schedule J: Your Expenses		12/13
Be as complete and accurate as possible. If two married people are fit information. If more space is needed, attach another sheet to this form (if known). Answer every question.	ing together, both are equally res n. On the top of any additional pa	sponsible for supplying correct ges, write your name and case number
Part 1: Describe Your Household		
1. Is this a joint case?		- M
No. Go to line 2. Yes. Does Debtor 2 live in a separate household?		
No		
Yes. Debtor 2 must file a separate Schedule J.	and the second s	
2. Do you have dependents?	Dependent's relationship to	Dependent's Does dependent live
Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	Dependent's Does dependent live age with you?
Do not state the dependents'		No
names.	1 11 11 11 11 11 11 11 11 11 11 11 11 1	Yes
		No
		No
	71.44.1 17.16.1 17.16.1 17.16.1 17.16.1 17.16.1 17.16.1 17.16.1 17.16.1 17.16.1 17.16.1 17.16.1 17.16.1 17.16.1	Yes
		☐ No
	···	Yes
		No
Do your expenses include expenses of people other than yourself and your dependents?		LYes
art 2: Estimate Your Ongoing Monthly Expenses		
stimate your expenses as of your bankruptcy filing date unless you ar xpenses as of a date after the bankruptcy is filed. If this is a supplement pplicable date.	e using this form as a supplemer ntal <i>Schedule J</i> , check the box at	nt In a Chapter 13 case to report the top of the form and fill in the
nclude expenses paid for with non-cash government assistance if you	know the value	
f such assistance and have included it on Schedule I: Your Income (Of	ficial Form B 6l.)	Your expenses
 The rental or home ownership expenses for your residence. Include fany rent for the ground or lot. 	•	4. \$ 812.08
If not included in line 4:		
4a. Real estate taxes		4a. \$
4b. Property, homeowner's, or renter's insurance	•	4b. \$
4c. Home maintenance, repair, and upkeep expenses	•	4c. \$
4d. Homeowner's association or condominium dues	4	4d. \$ <u>360.77</u>

Case 15-22736 Doc 1 Filed 07/01/15 Entered 07/01/15 12:01:40 Desc Main Document Page 22 of 28

Debtor 1

Debora M Roman

First Name Middle Name	Last Name	Case number (if known)

			Your exp	enses
5	. Additional mortgage payments for your residence, such as home equity loans	5.	\$	
6	Utilities:			
·	6a. Electricity, heat, natural gas	6a.	\$	60.00
	6b. Water, sewer, garbage collection	6b.	\$	00.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		55.00
	6d. Other. Specify:	6d.	\$	
7	Food and housekeeping supplies	7.	<u> </u>	300.00
8.	Childcare and children's education costs	8.	¢	000.00
9.	Clothing, laundry, and dry cleaning	9.	\$	50.00
10.	Personal care products and services	10.	\$	
11.	Medical and dental expenses	11.	\$	
12.	Transportation. Include gas, maintenance, bus or train fare.		*	
	Do not include car payments.	12,	\$	80.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	42.00
14.	Charitable contributions and religious donations	14.	\$	
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	s	
	15b. Health insurance	15b.	\$	
	15c. Vehicle insurance	15c.	\$	35.00
	15d. Other insurance. Specify:	15d.		
16,	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	
	17b. Car payments for Vehicle 2	17b.	\$	
	17c. Other. Specify:	17c.		
	17d. Other. Specify:	17 d .		
18.	Your payments of allmony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).	18.		W-7-14-1
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	PUP. 0.
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inco	me.		
	20a. Mortgages on other property	20a.	\$	
	20b. Real estate taxes	20b.	\$	****
	20c. Property, homeowner's, or renter's insurance	20c.	\$	*****
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	77uu s
	20e. Homeowner's association or condominium dues	20e.	\$	

Entered 07/01/15 12:01:40 Desc Main Case 15-22736 Doc 1 Filed 07/01/15 Page 23 of 28 Document Debora M Roman Debtor 1 Case number (if known) First Name Middle Name Last Name 21. Other. Specify: _ 22. Your monthly expenses. Add lines 4 through 21. 1,882.85 The result is your monthly expenses. 23. Calculate your monthly net income. 2,056.07 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 23b. Copy your monthly expenses from line 22 above. 1,882.85 23b. 23c. Subtract your monthly expenses from your monthly income. 173.22 The result is your monthly net income. 23c. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? Yes. Explain here:

B6 Declaration (Official Form 6 - Declaration) (12/07) In re Debora Roman

Debtor Case No.

DECLARATION CONCERNING DEBTOR'S SCHEDILLES

DECLARATION U	NDER PENALTY OF PERJURY BY INDIVI	DUAL DEBTOR
l deplare under penalty of porjury that I have read the fomy knowledge, information, and belief.	regoing summary and schedules, consisting of Q	Shacts, and that they are true and correct to the best
Date 08/23/2015	Signature: Del	no monar
		Debtor
Date	Signature:	(Joint Debtor, (fany)
	[If joint case, both spouse	s roust sign.)
DECLARATION AND SIGNATURE	OF NON-ATTORNEY BANKRUPTCY PETITION	
I declare under penelty of perjury that: (1) I am a bankruptcy p he debtor with a copy of this document and the notices and info- compligated prospent to 11 U.S.C. § 110(h) setting a maximum, mount before preparing any document for Ming for a debtor or	rmation required under 11 U.S.C. §§ 110(b), 110(h) and fee for services chargeable by bankruptor petition presa	l 342(b); and, (3) if rules or guidelines have been ters. I have given the debtor nutice of the maximum
rinted or Typed Name and Title, if any, f Bankruptcy Retition Preparer	Social Security No. (Required by 11 U.S.C. § 110.)	
the bankriptcy petition preparer is not an individual, state the ho signs this document.	nome, tille (if any), address, and social security number	of the officer, principal, responsible person, or partner
daress		
Signature of Bankruptoy Petition Preparer		
ames and Social Security numbers of all other individuals who	prepared or assisted in preparing this document, unless t	he bankrupto'y petition preparer is not an individual;
more than one person prepared this document, attach addition	al signed sheets conforming to the oppropriate Official I	Form for each person.
omkrupkcy petition preparer's follure to comply with the provisions (U.S.C. & 156.	of title 11 and the Federal Rules of Bankruptcy Procedure me	ny result in fines or imprisonment or both. 11 U.S.C. § 110;
DECLARATION UNDER PENALTY	OF PERJURY ON BEHALF OF A CORPO	ORATION OR PARTNERSHIP
artnership] of the	sident or other officer or na authorized agent of the or (corporation or partnership) named as debtor in thi sheets (<i>Total shown on summary page plus I</i>), and	s oase, declare under genalty of perjury that I have
noveledge, information, and belief:		
-,	Signature:	
-,		dividual signing on behalf of debtor.)

Case 15-22736 Doc 1 Filed 07/01/15 Entered 07/01/15 12:01:40 Desc Main Document Page 25 of 28

B 8 (Official Form 8) (12/08)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

	1 total District of Immors		
In re Debora Roman		Case No.	
Debtor		Chapter 7	

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A – Debts secured by property of the estate. (Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	7
Creditor's Name:	Describe Property Securing Debt:
Loan Care Servoing Center	8815 Golf Road, #9h, Niles, IL
Property will be (check one):	
☐ Surrendered ☐ Retained	I .
If retaining the property, I intend to (check at least one):	
☐ Redeem the property	
Reaffirm the debt	
☐ Other. Explain	(for example, avoid lien
using 11 U.S.C. § 522(f)).	•
Property is (check one):	•
and control	M. Niek alatura i
Clamed as exempt	Not claimed as exempt
Property No. 2 (If necessary)	
Creditor's Name:	Describe Property Securing Debt:
Citimortgage	8815 Golf Road, #9h, Niles, IL
Property will be (check one):	
☐ Surrendered ☑ Retained	
If retaining the property, I intend to (check at least one):	
☐ Redeem the property	
Reaffirm the debt	
🗖 Other. Explain	(for example, avoid lien
using 11 U.S.C. § 522(f)).	
Property is (check one):	
and one	Not olaimed as assessed
Chamica as exempt	Not claimed as exempt

B 8 (Official Form 8) (12/08)

Page 2

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional vages if necessary.)

Property No. 1		
Lessou's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2):
Property No. 2 (if necessary)		
Lessor's Name;	Describe Lensed Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2); □ YES □ NO
Property No. 3 (If necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2):
ontinuation sheets attack declare under populty of p state securing a debt and/or p	ed <i>(if any)</i> erjury that the above indicates my int ersonal property subject to an unexpi	tention as to any property of my red lease,
ate: 6/22/16	Debora 1	n Bonon
	Signature of Debtor	
		
	Married & A. A.	

Case 15-22736 Doc 1 Filed 07/01/15 Entered 07/01/15 12:01:40 Desc Main

B 203 (12/94)

Page 27 of 28 Document

United States Bankruptcy Court

Northern District Of Illinois

In re			
Debora	Roman	Case No.	
Debtor		Chapter	
DISC	LOSURE OF COMPENS	SATION OF ATTORNEY FOR DEBTOR	***************************************
named debtor(s bankruptcy, or	s) and that compensation paid t agreed to be paid to me, for se	or. P. 2016(b), I certify that I am the attorney for the above- to me within one year before the filing of the petition in ervices rendered or to be rendered on behalf of the debtor(s) to bankruptcy case is as follows:	
For legal servic	es, I have agreed to accept	\$_1500°00	\circ
Prior to the filin	ıg of this statement I have recei	ived \$ 1500.C	0
Balance Due .		\$ <u></u>	
2. The source of the	ne compensation paid to me w	as:	
Debto	or Other (specia	fy)	
3. The source of co	ompensation to be paid to me i	is:	
Debto	or Other (specif	fy)	
4. have not ag members an	greed to share the above-disclosed associates of my law firm.	sed compensation with any other person unless they are	
members or	d to share the above-disclosed associates of my law firm. A conaring in the compensation, is	compensation with a other person or persons who are not copy of the agreement, together with a list of the names of attached.	
5. In return for the case, including:	above-disclosed fee, I have agr	reed to render legal service for all aspects of the bankruptcy	
(a.) Analysis of the to file a petiti	ne debtor's financial situation, a on in bankruptcy;	and rendering advice to the debtor in determining whether	
(b) Preparation a	and filing of any petition, sched	dules, statements of affairs and plan which may be required;	
c.) Representation	on of the debtor at the meeting eof;	of creditors and confirmation hearing, and any adjourned	

Case 15-22736 Doc 1 Filed 07/01/15 Entered 07/01/15 12:01:40 Desc Main Document Page 28 of 28 DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR (Continued)

- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Any adversary proceeding.

CERTIFICATION

certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.

7/1/15

Signature of Attorney

Name of law firm